

EXHIBIT E

COMPLAINT - FOLLOW UP INFORMATION				CASE CLEARANCES, INITIAL ARREST ON THE COMPLAINT				ADDITIONAL STOLEN PROPERTY					
PD 313-081A (Rev. 4-89-31)				INV ASSAULT 1 (GUN)				Pet. 043 OCCB No. 2412 Complaint No. 2412 Date of This Report 02/12/01					
Date of Orig. Report 02/12/01		Date Assigned 02/12/01		Case No.		Unit Reporting 043							
Complainant's Name - Last, First, M.I. ACOSTA ALBERT								Victim's Name - If Different					
Last Name, First, M.I.								Address, Include City, State, Zip					
Home Telephone		Business Telephone		Position / Relationship		Sex	Race	Date of Birth	Age	Apt. No.			
Total No of Perpetrators		Wanted	Arrested	Weapon	Describe Weapon (If firearm, give color, make, calibre, type, model, etc.) <input type="checkbox"/> Used <input type="checkbox"/> Possessed								
Wanted		Arrested	Last Name, First, M.I.	Address, Include City, State, Zip						Apt. No.	Res. Pet.		
Sex		Race	Date of Birth	Age	Height ft in	Weight	Eye Color	Hair Color	Hair Length	Facial Hair	NYSID No.		
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc.											
Nickname, First Name, Alias		(Continue in "Details")											
Wanted		Arrested	Last Name, First, M.I.	Address, Include City, State, Zip						Apt. No.	Res. Pet.		
Sex		Race	Date of Birth	Age	Height ft in	Weight	Eye Color	Hair Color	Hair Length	Facial Hair	NYSID No.		
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc.											
Nickname, First Name, Alias		(Continue in "Details")											
AREA WITHIN BOX FOR DETECTIVE / LATENT FINGERPRINT OFFICER ONLY. THIS BOX WILL BE UTILIZED BY INVESTIGATOR WHENEVER POSSIBLE AND MUST BE FULLY COMPLETED WHEN USING THIS FORM TO CLOSE A CASE "NO RESULTS."													
Comp. Interviewed <input type="checkbox"/> Yes <input type="checkbox"/> No		In Person <input type="checkbox"/>	By Phone <input type="checkbox"/>	Date	Time	Results: Same as Comp. Report - Different (Explain in Details) <input type="checkbox"/> <input type="checkbox"/>							
Witness Interviewed <input type="checkbox"/> Yes <input type="checkbox"/> No		In Person <input type="checkbox"/>	By Phone <input type="checkbox"/>	Date	Time	Results Same as Comp. Report - Different (Explain in Details) <input type="checkbox"/> <input type="checkbox"/>							
Canvas Conducted <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes - Make Entry in Body Re: Time, Date, Names, Addresses, Results				Crime Scene Visited <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes - Make Entry in Details Re: Time, Date, Evidence Obtained					
Complainant Viewed Photos <input type="checkbox"/> Yes <input type="checkbox"/> Refused <input type="checkbox"/> Future		Results:											
Witness Viewed Photos <input type="checkbox"/> Yes <input type="checkbox"/> Refused <input type="checkbox"/> Future		Results:											
Crime Scene Dusted <input type="checkbox"/> Yes <input type="checkbox"/> No		By (Enter Results in Details)				Crime Scene Photos <input type="checkbox"/> Yes <input type="checkbox"/> No		By (Enter Results in Details)					
If Closing Case "No Results," Check Appropriate Box and State Justification in Details: <input type="checkbox"/> C-1 Improper Referral <input type="checkbox"/> C-2 Inaccurate Facts <input type="checkbox"/> C-3 No Evidence / Can't ID <input type="checkbox"/> C-4 Uncooperative Complainant <input type="checkbox"/> C-5 "Leads" Exhausted													
DETAILS:													
INVESTIGATE: ASSAULT 1 (GUN)													
SUBJECT: CONTENT OF TAPE PROVIDED BY PARKCHESTER SECURITY													
<p>1. ON 02/12/01 THE UNDERSIGNED RESPONDED TO 2000 EAST TREMONT AVE BX NY10462 AND SPOKE TO DENNIS B COWAN GENERAL MANAGER FOR PARKCHESTER SOUTH CONDOMINIUM. MR COWAN PROVIDED THE UNDERSIGNED WITH A TAPE OF RADIO TRANSMISSIONS OF PARKCHESTER SECURITY OFFICERS FROM 10:15:10 HOURS 02/12/01 TO 10:21:54 02/12/01. THE CONTENTS ARE AS FOLLOWS.</p> <p>2. 10:15:10 MANGANIELLO E/C/D TO PARK 4 REQUESTING 10-08 TO THE WEST. CENTRAL E/C/D YOU HAVE A MAN DOWN IN 1700 COPY. CENTRAL E/C/D COPY MANGANIELLO NEGATIVE CENTRAL CENTRAL RESPOND TO 1700 1700 MET OVAL YOU HAVE A MAN DOWN IN THE BASEMENT. MANGANIELLO E/C/D TO MET OVAL CAN YOU RELAY THE MESSAGE. MANGANIELLO E/C/D TO CENTRAL 10-05 CENTRAL E/A/B AND E/C/D AT 1700 REPORT BY TELEPHONE EMPLOYEE A MAN DOWN IN THE BASEMENT.</p>													
TIME ENDING 10:21:54 TAPE VOUCHERE 43 PCT VOUCHER K756936													
CASE <input type="checkbox"/> ACTIVE <input type="checkbox"/> CLOSED		DATE REVIEWED / CLOSED 2/12		IF ACTIVE, DATE OF NEXT REVIEW 2/20									
REPORTING OFFICER: REVIEWING / CLOSING		RANK DET		SIGNATURE <i>Luhr</i>		NAME PRINTED CITRON		TAX REG. NO.		COMMAND			
0788													